

FINAL INSPECTION REPORT
Under the *Retirement Homes Act, 2010*

Inspection Information	
Date of Inspection: November 9, 2021	Name of Inspector: Cindy Ma
Inspection Type: Routine Inspection	
Licensee: 2661694 Ontario Inc. / 515 Consumer's Road, North York, ON M2J 4Z2 (the "Licensee")	
Retirement Home: Lake Simcoe Retirement & Assisted Living / 24 Simcoe Street, Orillia, ON L3V 1G4 (the "home")	
Licence Number: N0509	

Purpose of Inspection
The RHRA conducts routine inspections as set out in section 77(3) of the <i>Retirement Homes Act, 2010</i> (the "RHA").

NON-COMPLIANCE
<p>1. The Licensee failed to comply with O. Reg. 166/11, s. 22; Risk of falls.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>22. (4) Every licensee of a retirement home shall keep a written record of all falls for which the licensee is required to ensure documentation under subsection (2) or (3) and that occur in each year, evaluate the risk of falls in the home at least annually and keep a written record of each evaluation.</p>
<p>Inspection Finding</p> <p>The Licensee failed to ensure that an analysis of resident falls was being conducted as prescribed by the Regulation.</p>
<p>Outcome</p> <p>At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.</p>
<p>2. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Involvement of resident, etc.. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Reassessment and revision.</p> <p>Specifically, the Licensee failed to comply with the following subsection(s):</p> <p>62. (5) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate in the development, implementation and reviews of the resident's plan of care.</p>

62. (12) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time if, in the opinion of the licensee or the resident,
(b) the resident’s care needs change or the care services set out in the plan are no longer necessary.

Inspection Finding

A review of a resident plan of care indicated non-compliance with the requirements to have the resident or their substitute decision makers participate in the development, and approval of the plan of care. In addition, the resident plan of care was not updated at the time the resident’s care needs changed.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

**3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.
The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.**

Specifically, the Licensee failed to comply with the following subsection(s):

65. (2) Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,
(a) the Residents’ Bill of Rights;
(c) the protection afforded for whistle-blowing described in section 115;
(d) the licensee’s policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents.

27. (9) The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,
(a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
(b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

At the time of the inspection the Licensee’s training records showed that a newly hired staff did not receive the listed training before beginning to work in the Home.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

4. The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

Specifically, the Licensee failed to comply with the following subsection(s):

- 27. (5)** The licensee of a retirement home shall ensure that,
- (0.b) all reasonable steps are taken in the retirement home to follow,
 - (i) any directive respecting coronavirus (COVID-19) issued to long-term care homes by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act,

Inspection Finding

At the time of the inspection, the inspector's observations did not support that the Licensee followed a directive respecting coronavirus (COVID-19) issued by the Chief Medical Officer of Health under section 77.7 of the Health Protection and Promotion Act. Specifically, the Licensee did not ensure that all individuals are actively screened for symptoms and exposure history for COVID-19 before they are allowed to enter the home.

Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by inspection.

5. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

Specifically, the Licensee failed to comply with the following subsection(s):

- 24. (4)** The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency.

- 24. (5)** The licensee shall,
- (a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,
 - (i) the loss of essential services,
 - (ii) situations involving a missing resident,
 - (iii) medical emergencies,
 - (iv) violent outbursts.

Inspection Finding

At the time of the inspection, the Licensee's emergency plan did not contain current arrangements with emergency partners. In addition, the Licensee had not completed testing of the emergency plan, in relation to loss of essential services; violent outbursts; missing residents; and medical emergencies.

Outcome


At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

NOTICE

The Final Inspection Report is being provided to the Licensee, the Registrar of the Retirement Homes Regulatory Authority (the “RHRA”) and the home’s Residents’ Council, if any.

Section 55 of the RHA requires that the Final Inspection Report be posted in the home in a conspicuous and easily accessible location. In addition, the Licensee must ensure that copies of every Final Inspection Report from the previous two (2) years are made available in the Home, in an easily accessible location.

The Registrar’s copy of the Final Inspection Report, as it appears here, will be included on the RHRA Retirement Home Database available online at <http://www.rhra.ca/en/retirement-home-database>.

Signature of Inspector 	Date December 1, 2021
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